

**COUNTY OF LOS ANGELES**

MARVIN J. SOUTHARD, D.S.W.  
*Director*

ROBIN KAY, Ph.D.  
*Chief Deputy Director*

RODERICK SHANER, M.D.  
*Medical Director*



**BOARD OF SUPERVISORS**

GLORIA MOLINA  
MARK RIDLEY-THOMAS  
ZEV YAROSLAVSKY  
DON KNABE  
MICHAEL D. ANTONOVICH

**DEPARTMENT OF MENTAL HEALTH**

<http://dmh.lacounty.gov>

550 SOUTH VERMONT AVENUE, LOS ANGELES, CALIFORNIA 90020

Reply To: (213) 738-4801  
Fax: (213) 386-1297

January 9, 2012

TO: Each Supervisor

FROM: Marvin J. Southard, D.S.W.  
Director

SUBJECT: **MENTAL HEALTH SERVICES ACT SKID ROW SERVICES  
QUARTERLY REPORT – JANUARY 2012**

This memo provides the latest status report regarding continuing Mental Health Services Act (MHSA) funded programs in the Skid Row area in response to your Board's April 3, 2007 motion instructing the Department of Mental Health (DMH) to take several actions related to efforts to reduce homelessness in Skid Row in coordination with communities outside of Skid Row.

Your Board instructed DMH to provide a quarterly progress report on the MHSA community-based services and supports planned for Skid Row including:

- Progress on implementation of programs planned for Skid Row, including Service Area Navigator Teams, Crisis Resolution Services, Full Service Partnerships, Wellness Centers, and the development of housing options;
- Tracking outcome measures for MHSA funded programs in the Skid Row area; and
- Tracking the number of clients who refuse medical treatment for alcohol and drug abuse.

We will continue to provide quarterly reports as instructed.

MJS:TB:LAH:mb

Attachment

c: Sachi A. Hamai, Executive Officer

*"To Enrich Lives Through Effective And Caring Service"*



DEPARTMENT OF STATE

STATE DEPARTMENT  
OFFICE OF THE SECRETARY  
WASHINGTON, D. C.

TO THE SECRETARY OF STATE  
FROM THE SECRETARY OF THE DEPARTMENT OF AGRICULTURE  
SUBJECT: [Illegible]

[Illegible text]

[Illegible text]

[Illegible text]

[Illegible text]

[Illegible text]

[Illegible text]

[Illegible text]

[Illegible text]

[Illegible text]

**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH  
MENTAL HEALTH SERVICES ACT  
SKID ROW SERVICES PROGRESS REPORT**

**January 9, 2012**

On April 3, 2007, the Board of Supervisors approved the Department of Mental Health's (DMH) request to utilize Mental Health Services Act (MHSA) funding to implement programs to reduce homelessness and promote wellness and recovery in the Skid Row area. Since that time, the Department has implemented the following programs:

- Crisis Resolution Service (CRS) at the Downtown Mental Health Center (DMHC) which provides short term, intensive mental health and supportive services, including comprehensive assessment, medication evaluation and management, emergency shelter placement, and the initiation of benefits establishment.
- Skid Row Management Team (SRMT) provides overall administration, management and coordination of existing services and the development of new services in collaboration with local stakeholder planning groups.
- Client Run Wellness Center (CR-WC) for the Skid Row area to serve individuals who no longer require intensive mental health services. On September 9, 2008, the Board of Supervisors approved the Board Letter awarding Emotional Health Association dba SHARE! the contract with DMH to operate the CR-WC in the Skid Row area. The program has been operational since April 2009.
- On March 1, 2009, the Department accomplished the goal of creating a directly operated Wellness Center through the successful transformation of the DMHC outpatient services.
- On June 30, 2009, the newly created DMHC Field Capable Clinical Services (FCCS) team began providing on-site mental health services, integrated with primary healthcare and substance abuse assessment services for clients at the Center for Community Health of Downtown Los Angeles (CCHDLA - formerly known as Leavey Center). The team also has the capacity to provide field services to those clients residing in the area's shelters and single room occupancy hotels.

DMH MHSA funded programs in the Skid Row area serve individuals in need of a variety of mental health and other treatment needs and supports. With the opening of the CCHDLA, CR-WC, the implementation of a DMHC FCCS team, and the transformation of our DMHC outpatient program to a professionally staffed, enhanced Wellness Center, mental health clients in the Skid Row area currently have a vastly enhanced array of wellness and recovery programming to address their individual service needs. Other MHSA funded programs that service the Skid Row area include

the DMHC Full Service Partnership (FSP) program, and the Service Area 4 Navigator Team (SANT 4) which are discussed below. Also included are detailed reports on the performance of the DMHC CRS program and the Department's funding of new housing development, and associated service collaboration efforts.

### **Full Service Partnership (FSP)**

DMHC FSP program was implemented in December 2006 and serves a maximum of 180 consumers. As of December 27, 2011, for which the outcome measures below are compiled, the number of enrollees was at 171 clients. There are an additional seven potential clients that have been recently referred for enrollment and are actively being outreached and engaged for services. Staff continues efforts to identify and enroll clients that require, and have proven to benefit from, the intensity of services provided through FSP. This effort is concurrent with the FSP program evaluating clients that have demonstrated the ability to engage and comply with treatment to programs with lesser levels of programming while still supporting continuing wellness and recovery gains. This latter process has resulted in seven cases being identified for closure. Alternate programming may consist of directly operated Wellness Center services; CR-WC services along with employment and ongoing support from a private mental health provider, and/or other services determined by the individualized needs of those clients. The outcomes described below illustrate the continuing successful efforts of DMHC FSP to reduce homelessness, incarceration, and acute psychiatric hospitalization.

- Days hospitalized in the year prior to enrollment vs. post-enrollment (adjusted for time): 60% decrease (previously, 56% decrease).
- Days homeless in the year prior to enrollment vs. post-enrollment (adjusted for time): 86% decrease (previously, 85% decrease).
- Days incarcerated year prior to enrollment vs. post-enrollment (adjusted for time): 21% decrease (previously, 22% increase).
- 79% of the 171 clients currently enrolled in FSP have been identified with a history of co-occurring mental health and substance abuse/use issue in various stages of recovery, from active or episodic use, to abstinence. Most are actively engaged in appropriate treatment, ranging from 12-Step meetings, and FSP Skid Row Co-Occurring Recovery and Empowerment (SCORE) treatment programming.

**Service Area 4 Navigation Team (SANT 4)**

SANT 4 covers a wide and diverse area, which includes the Skid Row area. SANT 4 links individuals of all ages to specialized mental health services such as FSP, Assertive Community Treatment (ACT), and Adult Targeted Case Management Services (ATCMS). One of the methods utilized by SANT 4 to accomplish its goals is through the Impact Unit. The Impact Unit serves a critical role in ensuring linkage to community programs and services. Meetings are held semi-monthly to provide Service Area 4's DMH contracted and directly operated programs the opportunity to review individual case referrals and to determine the most appropriate specialized programs (FSP, ACT, and ATCMS) to serve individual consumers.

The goals of SANT 4 are:

- Linkage to housing resources;
- Successful community reintegration for persons with mental illness from institutional settings;
- Provision of services for underserved, unserved and inappropriately served consumers with mental illness through linkage to appropriate type and level of care;
- Reduction in homelessness in the Skid Row area;
- Promotion of MHSA services in the community in collaboration with service providers and community agencies; and
- Successful outreach and engagement efforts by contracted and directly operated programs that identify and link prospective consumers to services.

During the last quarter, SANT 4 received a total of 121 referrals for **Adult** clients (26-59 years of age inclusively) for specialized programming. (See table below for referral location and disposition details.)

ADULT CLIENT REFERRALS		
DISPOSITION	# OF REFERRALS/ LOCATION	
	Non-Skid Row Area	Skid Row Area
Enrolled in FSP	39	5
Currently in Outreach and Engagement	18	4
Referred to Another Service Area	12	1
Admitted to an Institution for Mental Disease (IMD)	2	0
Enrolled in an Outpatient Program for Field Capable Clinical Services (FCCS)	13	3
Declined Specialized Services or did not meet FSP Criteria	15	1
Not Located During Outreach and Engagement Efforts	7	1
<b>SUBTOTAL</b>	<b>106</b>	<b>15</b>
<b>TOTAL ADULT REFERRALS</b>	<b>121</b>	

During the last quarter, SANT 4 received a total of 79 referrals for **Transitional Age Youth (TAY)** clients (16-25 years of age inclusively) for specialized programming. All referrals were from non-Skid Row areas. (See table below for disposition details.)

TAY CLIENT REFERRALS	
DISPOSITION	# OF REFERRALS
Enrolled in FSP	24
Currently in Outreach and Engagement	15
Referred to Another Service Area	11
Referred to Adult Age Group Services	3
Referred to Residential Services	1
Referred to DCFS Wraparound Services	1
Referred to PEI, FCCS, or other Outpatient Services	9
Linked to Private Provider	1
Declined Specialized Services or did not meet FSP Criteria	5
Not Located During Outreach and Engagement Efforts	2
Working with SANT to establish Service Eligibility	7
<b>TOTAL TAY REFERRALS</b>	<b>79</b>

### **Permanent Supportive Housing**

Consistent with the goal to reduce homelessness and promote wellness and recovery in the Skid Row area, the Department has committed MHSA funding to provide and/or leverage capital development, operating subsidy and service funding for the development of new supportive housing units. Overall, the Department is supporting the development of 781 new units of permanent supportive housing in Skid Row. Through its FSP and WC programs, DMHC has agreed to collaborate with SRO Housing Corporation to provide in-kind supportive services for several of their supportive housing projects in the Skid Row area. Currently, DMHC is providing in-kind supportive services to approximately 89 homeless individuals with a mental illness who are residing at the James Wood Apartments and the Renato Apartments. DMHC has also agreed to provide in-kind supportive services to homeless individuals with a mental illness who will be residing at the proposed SRO Gateways Apartments. This apartment complex will consist of a total of 108 permanent supportive housing apartments which are all efficiency studio units. It is scheduled to open in December 2012. Since the in-kind supportive services will be provided by DMHC, SRO has committed to set aside approximately 53 units for DMHC clients (See Figure 1).

**Figure 1**

DMHC Supported Units		Number of Units	
Project Name	FSP & WC Supported Units	Total Units	
Renato Apartments	58	96	
The James Wood Apartments	31	53	
The Gateways Apartments	53	108	
Total DMHC FSP/WC Supported Units	142	257	

Through the MHSA Housing Program, a component of the MHSA Community Services and Supports Plan, the Department has made a local commitment to provide capital development and capitalized operating subsidies for the development of new supportive housing units. As of December 21, 2011, DMH has committed MHSA funds to 35 projects to provide permanent supportive housing. Of these 35 projects, three are located in the Skid Row area creating 133 new permanent housing units for individuals with a mental illness and 333 total supportive housing units (See Figure 2). The remaining 32 projects are distributed throughout the County of Los Angeles with at least one project in each Service Planning Area.

On December 9, 2011, SRO Housing Corporation celebrated the grand opening and leasing of the Ford Apartments that provided 90 new units of supportive housing targeting individuals with a mental illness. The Charles Cobb Apartments, a Skid Row Housing Trust project, opened in December 2009. New Genesis Apartments, another Skid Row Housing Trust project, remain under construction.

**Figure 2**

MHSA Housing Program	Number of Units	
	MHSA Units	Total Units
Charles Cobb Apartments	25	76
The Ford Apartments	90	151
New Genesis Apartments	18	106
Total MHSA Housing Program Units	133	333

Finally, a Countywide MHSA Housing Trust Fund (HTF) Program of \$10.5 million was established to support the development of new permanent supportive housing for people with psychiatric disabilities. The HTF provides funds for on-site supportive services for supportive housing projects as well as supportive services for scattered site housing projects.

Of the 15 executed Service Agreements for the HTF Program, 12 are in operation. One of the operational service agreements involves both shared housing and scattered site projects. Through the HTF Program, supportive services are being provided to approximately 400 tenants residing in permanent supportive housing. The services being provided assists formerly homeless individuals and their families maintain their housing and pursue their recovery goals. As indicated in Figure 3, two of the Housing Trust Fund Program projects are located in Skid Row. Project Home opened in December 2010. The Rainbow and Abbey Apartments are fully occupied.

**Figure 3**

HTF Program		
Project	Number of Units	
	HTF Units	Total Units
Project Home	22	71
Rainbow & Abbey Apartments	50	120
Total HTF Units	72	191



### **Housing Assistance**

As indicated in Figure 4, the Department provides financial resources for clients moving into housing from homelessness by paying the security deposit and purchasing the basic essentials to furnish their apartment. During the period July 1, 2011 through September 30, 2011, the Department assisted the following numbers of DMHC clients with securing permanent housing:

**Figure 4**

Type of Assistance	Number of Clients
<b>Security Deposit at time of Move In</b>	<b>16</b>
<b>Purchasing Household Goods</b>	<b>55</b>
<b>Ongoing Rental Assistance</b>	<b>14</b>
<b>Eviction Prevention</b>	<b>2</b>
<b>Total Clients Assisted</b>	<b>87</b>

### **Crisis Resolution Services (CRS)**

CRS is a short term (60 days or less), outpatient, intensive, clinical and case management program that provides crisis intervention and stabilization for new, returning, or disengaged clients. Services include but are not limited to: emergency shelter, transitional and permanent housing, and referrals for medical and dental services, benefits establishment, intensive case management, psychiatric services, medication, short-term psychotherapy, and crisis intervention.

We are able to report the following information for the period October 1, 2011 through December 31, 2011:

Client Outcomes - 30 Days After Receiving CRS Services	
97.6%	Did Not require Psychiatric Emergency Response
96.8%	Were Not Admitted for Psychiatric Hospitalization
97.8%	Were Not Incarcerated

Since implementation, CRS has:

- **Opened 9,661** (through September 2011) unique episodes;

- **Provided linkage** to emergency, transitional or permanent housing to **25%** of homeless clients on day of screening or intake; and
- **Engaged 24%** of all clients with a co-occurring mental health and substance use/abuse issue(s). As a result, these clients were successfully **enrolled** in professional treatment or peer counseling services. Motivational engagement efforts with the remaining 76% are ongoing.

Within 90 days after initial services from Downtown CRS, 22.7% of the clients were linked to and seen by another outpatient mental health service provider.

CRS provides immediate, frequent, intensive case management for clients and employs a "whatever-it-takes" approach to addressing individual needs, including mental health services, housing, physical health care, and assistance with benefits establishment. Due to its demonstrated success over the past three years, DMH has developed additional CRS programs in each Service Area throughout the county.

#### **Skid Row Management Team (SRMT)**

During this past quarter the DMH SRMT continued its ongoing efforts to sustain engagement with community providers and stakeholder groups, including consumers and loft dwellers, to obtain critical input about the many issues affecting the Skid Row area. The SRMT has held bi-monthly meetings of the Skid Row Community Advisory Board (SRCAB) as a vital venue for this community engagement effort. The SRCAB is comprised of Skid Row stakeholders, i.e., housing, health, and social service providers; and residents, including consumers that are dedicated to collaborative and integrative efforts to develop more accessible, and effective social and health care services.

SRMT activities over the past quarter have included:

- Represented DMH in the Center for Community Health of Downtown Los Angeles (formerly called Leavey Center) Clinical and Executive Leadership Team meetings. Other participant agencies are JWCH; Homeless Healthcare of Los Angeles; and County agencies: Departments of Public Health and Health Services;
- Met with representatives of JWCH and CEO Service Integration Branch to continue planning efforts for the implementation of NextGen, an electronic health record at CCHDLA;

- Met with the Executive Director of LAMP, Inc., to plan and coordinate the provision of services with the planned move of that agency's Wellness Center to a new site;
- Hosted and participated in weekly and monthly meetings of the Skid Row (Family) Assessment Team (SRAT) with Department of Children and Family Services (DCFS), Department of Public Social Services (DPSS), Department of Public Health (DPH), and Los Angeles Homeless Services Authority (LAHSA) regarding the ongoing provision of collaborative services to homeless families with minors;
- Facilitated the co-location of DMHC PEI staff at the Center for Community Health of Downtown Los Angeles two days per week;
- Hosted monthly meetings with the Program Heads of SA 4 directly operated programs to coordinate the provision of mental health services throughout the Service Area, including making operational expanded PEI services, Healthy Way L.A. (HWLA), and AB 109 programming;
- Hosted bi-monthly meetings with DMH SRCAB, which is a local forum for consumers, families, service providers, and community representatives to provide the SRMT with information, advice and recommendations regarding the mental health service needs in the Skid Row community;
- Participated in the monthly DMH SA 4 Executive Providers Meetings in collaboration with SA 4 Management Team;
- Participated in the monthly Service Area Advisory Committee (SAAC) meetings for SA 4. SAAC meetings are comprised of community stakeholders, including residents, persons who work in the area, consumers, family members of consumers and social service agencies. The meetings serve to educate the public about the MHSA, including priorities such as PEI, and solicit input and feedback from the public about DMH's implementation of MHSA programs;
- Participated in the Los Angeles City/County Coordinating Council for Homeless Families' monthly working group meetings to implement recommendations of the Los Angeles 10-Year Plan to End Homelessness that are specific to family homelessness, by ending and preventing family homelessness via increased interagency collaboration and service delivery, and increasing access to housing. The work group is exploring ways to address the increase in family homelessness due to the current mortgage and foreclosure crisis;

- Continued participation in the Central Library Project, a weekly outreach and engagement service with the Los Angeles City Library in downtown Los Angeles which to date has provided information to over 600 prospective mental health clients who frequent that site;
- Continued technical assistance at the full MHSA transformation of HMHC to enhance the effectiveness of MHSA programming to be offered to that community, such as CRS, and a range of PEI evidenced based practices;
- Concluded the direct involvement of DMH staff in La Placita Project, facilitating a successful transition of mental health outreach and engagement efforts to the Latino Behavioral Health Institute Promotores staff. In conjunction with the First District other founding participating agencies (Adult Protective Services, Los Angeles Homeless Services Authority, TeleCare FSP, and the DPSS) continue to conduct outreach, engagement, and service provision, including housing, benefits establishment assistance, and mental health services to homeless individuals in and around the old Plaza Church. The project housed 78 individuals.

SRMT continues to work collaboratively with area stakeholders, service providers, and residents to enhance mental health services, and related programming and supports for homeless persons in the Skid Row area.

### **Summary**

In summary, the Department of Mental Health is committed to enhance and increase innovative community based mental health services, housing, effective stakeholder collaborations, and other related services in the Skid Row area through the development of newly funded MHSA programs, and the transformation of existing services. Most recently this has included the implementation of FCCS at the CCHDLA, a private and public partnership offering fully integrated medical and behavioral health services; the opening of the SHARE! Client Run Wellness Center; collaboration with SRO Housing Corporation's James M. Wood Apartments, providing on-site mental health services to residents, and coordinating supportive services at the Renato and the recently opened Ford Apartments; the continuation of the Los Angeles Library Outreach; and concluding the highly successful leadership of La Placita Project which targeted identification of homeless individuals and linking them to mental health and other critical services. DMH programming in the Skid Row area has become a model for effective, integrated and collaborative services countywide. These programs are dedicated to reducing homelessness for individuals with mental illness and breaking the costly cycle of emergency or inpatient psychiatric care, and/or incarceration, while promoting recovery and successful community reintegration.